WP Assessment Driver Flow and Screen Changes

Expected Outcome:
Awareness and knowledge of the changes that have been made to the work program assessment driver flow and screens.

Objectives:
Upon completion of this course, you will be able to:
- Identify the new assessment driver flow for ongoing work program cases.
- Recognize new fields on each of the assessment screens.
- Complete the two new screens added to the driver flow.

Table of Contents

Introduction

This document provides information related to the changes being made to the WP subsystem in CARES. These changes have been made in order to provide a better process in CARES for case managers to complete thorough informal assessments with their participants and gather more complete information in one location. Any case manager who works with W-2, FSET, WAA, WTW, or Children First will be affected by the changes.

Changes include deletion of some fields, addition of new fields, and three new screens. The order of the driver flow for enrolled individuals has been rearranged. All WP assessment screens will now have history. Workers can access this history by using the PF8 key on any screen with More… in the lower right corner.

This packet contains screen prints of the new screens and identifies the changes. The numbers along the left and right of the screen prints indicate which line of text the fields are on. These line numbers will be referred to when fields are identified. When a field has been deleted from a line, the line number will refer to the line number from the screen as it looked prior to 12/21/01. A separate handout contains copies of the screens as they looked prior to 12/21/01.

Tables relevant to each screen are listed. There have been changes to some of the existing tables, but they will not be discussed in this document. New tables are located in the appendix.

MNWA – Work Programs Submenu A

```
     ******************************************************************************
01*  MNWA                        WORK PROGRAMS SUBMENU A          10/18/01 09:34    *01
02*                                                               XID123 A WORKER   *02
03*  FUNCTION                                   TRAN                                 *03
04*   NUMBER        FUNCTION DESCRIPTION        CODE   PARAMETERS (PARMS)            *04
05*                                                                                 *05
06*    1 - REQUEST REFERRAL LISTING            (WPRR)                                *06
07*    2 - CR/AE REFERRAL ACTION HISTORY       (WPAH) PIN                            *07
08*    3 - ENROLLMENT                          (WPEN) PIN                            *08
09*    4 - ASSESSMENT-EDUCATION                (WPED) PIN                            *09
10*    5 - ASSESSMENT-EMPLOYMENT               (WPAW) PIN                            *10
11*    6 - ASSESSMENT-PARTICIPATION READINESS  (WPJR) PIN                            *11
12*    7 – ASSESSMENT – BARRIER DETAILS        (WPBD) PIN/(BARRIER)/A(ADD)           *12
13*    8 – ASSESSMENT UNSUBSIDIZED EMPLOYMENT  (WPRU) PIN                            *13
14*    9 - EMPLOYABILITY PLAN-1                (WPJS) PIN                            *14
15*   10 - EMPLOYABILITY PLAN-2                (WPAS) PIN                            *15
16*   11 - NON-PARTICIPATION HISTORY LISTING   (WPNP) PIN                            *16
17*   12 - NON-PARTICIPATION HISTORY           (WPNH) PIN/A(ADD)                     *17
18*   13 - COMPONENT/STATUS HISTORY            (WPCH) PIN                            *18
19*   14 – CREATE/UPDATE COMPONENT STATUS      (WPCS) PIN                            *19
20*             *** PLEASE ENTER THE NUMBER OF THE DESIRED FUNCTION __               *20
21*  PARMS: _____                         *21
22*                                                              PAGE: 01 OF 02      *22
23*  NEXT TRAN: ____      PARMS: _____     *23
24*                                                                                 *24
     ******************************************************************************


     ******************************************************************************
01*  MNWA                        WORK PROGRAMS SUBMENU A          10/18/01 09:34    *01
02*                                                               XID123 A WORKER   *02
03*  FUNCTION                                   TRAN                                 *03
04*   NUMBER        FUNCTION DESCRIPTION        CODE   PARAMETERS (PARMS)            *04
05*                                                                                 *05
06*   15 – TRANSACTION HISTORY                 (WPTN) PIN/(OFFICE)/(C0UNTY)          *06
07*   16 – ASSESSMENT TESTING SUMMARY          (WPTS)  PIN                           *07
08*   17 - MISSING ATTENDANCE MONTHLY TRACKING (WPMA) (CASE)/(PIN)/(MMCCYY)/(MMDDYY) *08
09*                                                                                 *09
10*                                                                                 *10
11*                                                                                 *11
12*                                                                                 *12
13*                                                                                 *13
14*                                                                                 *14
15*                                                                                 *15
16*                                                                                 *16
17*                                                                                 *17
18*                                                                                 *18
19*                                                                                 *19
20*             *** PLEASE ENTER THE NUMBER OF THE DESIRED FUNCTION __               *20
21*  PARMS: _____                         *21
22*                                                              PAGE: 02 OF 02      *22
23*  NEXT TRAN: ____      PARMS: _____     *23
24*                                                                                 *24
     ******************************************************************************
```

Deleted Lines/Fields

None

Added Lines/Fields

Line 12: Function number 7 – Assessment – Barrier Details

Line 13: Function number 8 – Assessment Unsubsidized Employment

Screen 2, Line 7: Function number 16 – Assessment Testing Summary

Modified Lines/Fields

None

WPDA – Work Programs Driver Flow

```
   ***************************************************************************
01* WPDA                 WORK PROGRAMS DRIVER FLOW              10/18/01 09:34    *01
02* COUNTY:                                                    XID123 A WORKER    *02
03* PIN NUMBER: 0123456789                                                        *03
04* CASE NUMBR: 1234567890                                                        *04
05*                                                                               *05
06*                                                                               *06
07*                                                                               *07
08*                                                                               *08
09*                                                                               *09
10*    WPEN: _     WPED: _     WPAW: _     WPEL: _     WPEH: _     WPJR: _    WPBD: _  *10
11*                                                                               *11
12*                                                                               *12
13*    WPRU: _     WPJS: _     WPAS: _     WPCH: _     WPCS: _     AIPO: _        *13
14*                                                                               *14
15*                                                                               *15
16*                                                                               *16
17*                                                                               *17
18*                                                                               *18
19*                                                                               *19
20*                                                                               *20
21*                                                                               *21
22*                                                                               *22
23* NEXT TRAN: ____     PARMS: _____         *23
24*                                                                               *24
   ***************************************************************************
```

WPDA displays the status of the screens in the driver flow. Status codes are N, Y, or C. N means the screen is not required as part of the flow. Y means the screen is required. C means the screen has been completed.

Deleted Lines/Fields

None

Added Lines/Fields

Line 10: WPBD

Line 13: WPRU

Modified Lines/Fields

Line 10: WPJR now appears after WPEL and WPEH in the driver flow.

WPEN – Enrollment

```
    **********************************************************************************
01* WPEN                        ENROLLMENT                    10/18/01 09:34    *01
02*                                                          XID123 A WORKER    *02
03* PIN: 0123456789      SSN: 111 22 3333         OFFICE: 9876                  *03
04* NAME: _____ _ _____ _____ COUNTY/TRIBAL UNIT: __     *04
05*         NUMBER    UNIT DIR   ST/RURAL RT/BOX#    SFX   QUAD  APT             *05
06* ADDRESS: _____  ___ __  _____ ____  __  _____            *06
07*           _____                             *07
08*   CITY: _____ STATE: __ ZIP: _____                           *08
09* SEX: _                          DATE OF BIRTH: __ __ ____                   *09
10* PRIMARY PHONE: _____     MESSAGE PHONE: ___ ___ ____                 *10
11* RACE/ETHNIC: _                  LANGUAGE CODE: _  LANGUAGE SPOKEN: _         *11
12* REFUGEE: _  ENTRY DATE: __ __ ____   TRIBAL MEMBER: __                       *12
13* VETERAN: _                      MILITARY DATES: __ __ ____ TO __ __ ____     *13
14* DISABILITY: _                   CASE MANAGER: _____                        *14
15*                                                                             *15
16* ENROLLMENT DATE: __ __ ____       ENROLLMENT WITH ORIENTATION (Y/N): _      *16
17* ENROLLMENT PROVIDER: ____         ENROLLMENT STAFF ID: _____               *17
18*                                                                             *18
19*                                                                             *19
20*                                                                             *20
21*                                                                             *21
22*                                                                             *22
23* NEXT TRAN: ____    PARMS: _____           *23
24*                                                                             *24
    **********************************************************************************
```

Deleted Lines/Fields

Line 14: Currently Employed

Line 15: Vehicle Available, Drivers License, and Type

Line 16: Currently In School, Highest Ed. Level, and Last Year Attended

Added Lines/Fields

None

Modified Lines/Fields

Line 14: Case Manager field moved from line 18 to line 14.

Line 16: Enrollment Date and Enrollment With Orientation moved from line 19 to line 16.

Line 17: Enrollment Provider and Enrollment Staff ID moved from line 20 to line 17.

WPED – Assessment - Education

```
    ************************************************************************************
01* WPED                    ASSESSMENT – EDUCATION            10/18/01 09:34     *01
02*                                                        XID123 A WORKER       *02
03* PIN: 0123456789   OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123        *03
04* NAME: EXAMPLE        CASE            A                                       *04
05* LAST ASSESSMENT UPDATE: __ __ ____            UPDATED DATE: __ __ ____       *05
06*                                                                             *06
07* DO YOU WANT TO INITIATE A NEW ASSESSMENT: _ (Y/N)                           *07
08*                                                                             *08
09* EDUCATION HISTORY:   ORIGINAL   CURRENT                                     *09
10*  HIGHEST ED. LEVEL:    ___       ___      CURRENTLY IN SCHOOL: _            *10
11*  LAST YEAR ATTENDED:   ____     ____                                        *11
12*    WHERE ATTENDED      DEGREE     MM/YR RECEIVED     COURSE OF STUDY        *12
13*  _____    __       __ ____      _____        *13
14*  _____    __       __ ____      _____        *14
15* TESTING:     --------ORIGINAL--------   --------CURRENT---------           *15
16*            LEVEL   TEST   MM/YEAR     LEVEL   TEST   MM/YEAR               *16
17*  READING    ____    ____   __ ____     ____    ____   __ ____             *17
18*  MATH       ____    ____   __ ____     ____    ____   __ ____             *18
19*  ENGLISH    ____    ____   __ ____     ____    ____   __ ____             *19
20*  APTITUDE           ____   __ ____             ____   __ ____             *20
21*  INTEREST           ____   __ ____             ____   __ ____             *21
22* PF14 WPAW  PF15 WPJR   PF16 WPJS   PF17 WPTS                             *22
23* NEXT TRAN: ____    PARMS: _____       *23
24*                                                                           *24
    ************************************************************************************
```

Deleted Lines/Fields

Line 7: Reason Left (school)

Line 12-14: The third, fourth, and fifth lines of entry fields for Where Attended, Degree, MM/YR Received, and Course of Study

Added Lines/Fields

Line 5: Updated Date contains the last date that a change was made to the particular screen. This field cannot be changed by the worker.

Line 7: Do You Want To Initiate A New Assessment? Answering Y to this question starts the assessment driver flow. **Note**: This is not the enrollment driver flow. Enrollments will continue to follow the existing flows for each program.

Line 10: Currently In School

Line 22: PF17 WPTS functionality. Using this PF key will take the worker to WPTS.

Modified Lines/Fields

Line 3: CTY/Tribe field moved from line 4 to line 3. Case Manager field moved from line 5 to line 3.

Line 5: Last Assessment Update field was changed to an output only field. This means that only CARES can change this date.

Line 9: Education History, Original, and Current moved from line 6 to line 9.

Line 10: Highest Ed. Level field moved from line 7 to line 10.

Line 11: Last Year Attended field moved from line 8 to line 11.

Lines 12-14: Where Attended, Degree, MM/YR Received, and Course of Study moved from lines 9-11 to lines 12-14.

Lines 17-21: Original Testing details for Reading, Math, English, Aptitude, and Interest are now output-only fields. Workers cannot make entries to these fields.

Tables

Highest Education Level:	TWED (WP individual education level)
Degree:	TCDT (college degree type codes)
Testing Level:	TWTL (test level codes)
Reading Test:	TWRT (reading test codes)
Math Test Code:	TWMT (math test codes)
English Test:	TWET (English test level codes)
Aptitude Test:	TWAL (aptitude test codes)
Interest Test:	TWIL (interest test)

WPTS – Assessment - Testing Summary

```
   *******************************************************************************
01* WPTS                 ASSESSMENT-TESTING SUMMARY          10/18/01 09:34    *01
02*                                                     XID123 A WORKER        *02
03* PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123     *03
04* NAME: EXAMPLE        CASE           A                                      *04
05*                                                                            *05
06*          LEVEL      TEST      MM/YEAR                                       *06
07* READING  _____     _____     __ ____                                       *07
08* MATH     _____     _____     __ ____                                       *08
09* ENGLISH  _____     _____     __ ____                                       *09
10* APTITUDE           _____     __ ____                                       *10
11* INTEREST           _____     __ ____                                       *11
12*                                                                            *12
13*                                                                            *13
14* READING  _____     _____     __ ____                                       *14
15* MATH     _____     _____     __ ____                                       *15
16* ENGLISH  _____     _____     __ ____                                       *16
17* APTITUDE           _____     __ ____                                       *17
18* INTEREST           _____     __ ____                                       *18
19*                                                                            *19
20*                                                                            *20
21*                                                                            *21
22* PF13 WPED  PF14 WPAW   PF15 WPJR                                           *22
23* NEXT TRAN: _____     PARMS: _____ MORE...*23
24*                                                                            *24
   *******************************************************************************
```

This screen provides a history of test results for a participant. No entries can be made to WPTS by the worker. Each time a change is made to the Current Testing fields on WPED, the information will appear on this screen. CARES will pull forward each set of records, even if only one test result was modified.

WPAW – Assessment - Employment

```
      **********************************************************************
01*  WPAW                    ASSESSMENT - EMPLOYMENT          10/18/01 09:34    *01
02*                                                        XID123 A WORKER      *02
03*  PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123     *03
04*  NAME: EXAMPLE        CASE           A                                      *04
05*  LAST ASSESSMENT UPDATE: __ __ ____           UPDATED DATE: __ __ ____      *05
06*  PROGRAM EMPLOYMENT GOAL:       DOT              TITLE                      *06
07*                    PRIMARY: ___ ___ ___   _____    *07
08*                  SECONDARY: ___ ___ ___   _____    *08
09*  LICENSES/CERTIFICATIONS:    _____  _____  _____   *09
10*  OPERATES THE FOLLOWING EQUIPMENT: ___  ___  ___  ___  ___                 *10
11*  SPECIALIZED SKILLS SUMMARY:       ___  ___  ___  ___  ___                 *11
12*  VOLUNTEER WORK/HOBBIES:      _____  *12
13*  OTHER LANGUAGE: _     VERBAL(Y/N): _     WRITTEN(Y/N): _                  *13
14*                    _                _                   _                  *14
15*  CURRENTLY EMPLOYED:  _ (Y/N) EMPLOYMENT IN LAST 24 MONTHS?: _ (Y/N)       *15
16*  CONVICTED OF CRIME?: _ (Y/N) IF Y EXPLAIN: _____    *16
17*                                             M  T  W  R  F  S  S            *17
18*  PREFERRED WORK HOURS:    __ __ TO  __ __    DAYS: _ _ _ _ _ _ _           *18
19*  UNABLE TO WORK HOURS:    __ __ TO  __ __    DAYS: _ _ _ _ _ _ _           *19
20*  REASON UNABLE TO WORK:       _____     *20
21*  WORK ENVIRONMENT PREFERENCES: __  __  __    WILL RELOCATE (Y/N): _        *21
22*  PF13 WPED  PF15 WPJR   PF16 WPJS             PRINTS ON EMPLOYABILITY PLAN  *22
23*  NEXT TRAN: ____      PARMS: _____  MORE...*23
24*                                                                            *24
      **********************************************************************
```

Deleted Lines/Fields

Line 9: Additional Employment Goal DOT and Title

Lines 10-12: Related Goals (Long Term and Short Term)

Added Lines/Fields

Line 5: Updated Date

Lines 13-14: Other Language, Verbal, and Written. There is space for a second
     language code on line 14.

Line 15: Currently Employed and Employment In Last 24 Months

Line 16: Convicted Of Crime and If Y Explain. These fields replace the Felony
     Conviction indicator that was on WPJR.

Modified Lines/Fields

Line 3: CTY/Tribe and Case Manager fields were moved from lines 4 and 5 to line 3.

Line 5: Last Assessment Update field was changed to an output only field.

Lines 9-12: Licenses/Certifications, Operates The Following Equipment, Specialized Skills Summary, and Volunteer Work/Hobbies fields moved from lines 13-16 to lines 9-12.

Tables

DOT: TDOT (WP dictionary of occupational titles)
Operates Following Equipment: TWPM (WP machinery type code)
Specialized Skills: TWSS (WP specialized skills)
Other Language: TLAG (language codes table)
Work Environment Preferences: TWEN (WP work environment type code)

WPEH – Employment History

```
     **********************************************************************************
01*  WPEH                     EMPLOYMENT HISTORY                10/18/01 09:34    *01
02*                                                             XID123 A WORKER    *02
03*  PIN: 0123456789                                WDA: 01   CTY/TRIBE: 01        *03
04*  NAME: EXAMPLE       CASE           A            OFFICE: 9876                   *04
05*                                                                                *05
06*   ENTERED EMPLOYMENT(Y/N): _                                                   *06
07*  BEGIN DATE: __ __ ____                END DATE: __ __ ____                    *07
08*                                                                                *08
09*  PROVIDER ID:    ____        STAFF ID: _____                                 *09
10*  DURATION:  _ FULLTIME LESS THAN 30 DAYS    _ PARTTIME LESS THAN 30 DAYS       *10
11*            _ FULLTIME 30 DAYS OR MORE      _ PARTTIME 30 DAYS OR MORE          *11
12*  EMPLOYER TYPE: PUBLIC _   PRIVATE _        AVG HRS/WEEK: __                   *12
13*      EMPLOYER NAME: _____  EMPLOYER SEQ NUM: __      *13
14*      ADDRESS:       _____                           *14
15*                     _____                           *15
16*      CITY:          _____  STATE: __  ZIP: _____           *16
17*   DOT: ____      HOURLY WAGE: _____    PAY CODE: __                          *17
18*  JOB DUTIES:  _____                                 *18
19*               _____                                 *19
20*               _____    REASON FOR LEAVING: __       *20
21*  MEDICAL BENEFITS: _   OTHER BENEFITS: __                                     *21
22* PF13 WPED  PF14 WPFT-30  PF15 WPFT-180  PF5 REFRESH WPEH                      *22
23* NEXT TRAN: ____     PARMS: _____          *23
24*                                                                                *24
     **********************************************************************************
```

Deleted Lines/Fields

None

Added Lines/Fields

Line 22: PF5 key functionality to refresh WPEH

Modified Lines/Fields

None

WPJR – Assessment - Participation Readiness

```
   ****************************************************************************
01* WPJR              ASSESSMENT - PARTICIPATION READINESS     10/18/01 09:34    *01
02*                                                         XID123 A WORKER      *02
03* PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123       *03
04* NAME: EXAMPLE         CASE          A                                        *04
05* LAST ASSESSMENT UPDATE: __ __ ____          UPDATED DATE: __ __ ____         *05
06* TRANSPORTATION: TRANSPORTATION TYPE: __ __ __      LIABILITY INSURANCE(Y/N): _ *06
07*             VEHICLE: _  VALID DRIVERS LICENSE(Y/N): _   STATE: __   TYPE: _ _*07
08* IF NO VALID LICENSE WHY?: _____         *08
09* WILL COMMUTE ONE WAY: __ MILES                                              *09
10*                                                                            *10
11* CHILD CARE:    NO. OF CHILDREN NEEDING CARE: __   CARE ARRANGED(Y/N): _     *11
12*              TYPE OF ARRANGEMENT: __   __   __                             *12
13* SUPPORTIVE SERVICES NEEDED: ____ ____ ____ ____ ____                        *13
14* CLIENT STATED ASSETS: ___  ___  ___  ___  ___                              *14
15* OTHER AGENCY/PROGRAM PARTICIPATION            : __  __  __  __  __         *15
16*   PARTICIPATION BY (F- FAMILY MEMBER C- CLIENT): _   _   _   _   _         *16
17* COMMENTS:_____*17
18* _____*18
19*                                                                            *19
20* ARE THERE CONDITIONS AFFECTING PARTICIPATION (Y/N): _                      *20
21*                                                                            *21
22* PF13 WPED  PF14 WPAW  PF16 WPJS                                            *22
23* NEXT TRAN: ____      PARMS: _____ MORE...*23
24*                                                                            *24
   ****************************************************************************
```

Deleted Lines/Fields

Line 12: Funding Needed (for child care)

Line 15-17: Conditions Affecting Participation (C-Client F-Family Member), Medical, Family Problem, Housing, Legal, Other, No/Limited English, and Felony Conviction. This data is now collected on WPBD.

Line 19: Other Language, Verbal, and Written. This data is now collected on WPAW.

Line 20: Client Stated Limitations comment line

Line 21: Job Ready indicator

Added Lines/Fields

Line 5: Updated Date field

Line 8: If No Valid License Why comment line

Line 20: Are There Conditions Affecting Participation? Answering Y to this question will bring up new screen WPBD next in the driver flow.

Modified Lines/Fields

Line 3: CTY/Tribe and Case Manager fields moved from lines 4-5 to line 3.

Line 9: Will Commute One Way field moved from line 8 to line 9.

Line 13: Supportive Services Needed fields moved from line 21 to line 13.

Line 15-18: Other Agency/Program Participation fields, Participation By (F- Family Member, C- Client) fields, and Comments line moved up from lines 17-18 and were reworded. The comment line was extended.

Tables

Transportation Type:	TTRN (transportation type)
Driver's License:	TWDR (driver's license table)
State:	TSTA (state and territories codes)
Type Of Arrangement:	TWCA (WP child care arrangement type)
Supportive Services Needed:	TSSC (WP supportive services code)
Client Stated Assets:	TWEA (WP employability assets)
Other Agency/Program Participation:	TWOA (other agency/program involvement)

WPBD – Barrier Details

```
   ****************************************************************************
01* WPBD                 ASSESSMENT – BARRIER DETAILS          10/18/01 09:34      *01
02*                                                       XID123 A WORKER          *02
03* PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123         *03
04* NAME: EXAMPLE         CASE           A                                         *04
05* LAST ASSESSMENT UPDATE: __ __ ____               UPDATED DATE: __ __ ____      *05
06* DC: _     BARRIERS: __     INDIVIDUAL AFFECTED: _  (C- CLIENT F- FAMILY MEMBER)*06
07* BARRIER BEGIN DATE: __ ____                  BARRIER END DATE: __ ____         *07
08* COULD BARRIER AFFECT HOURS OF PARTICIPATION?: _ (Y/N)                          *08
09* HOW SOON CAN BARRIER BE OVERCOME?:                                             *09
10*   _  < 1 MONTH   _  1-3 MONTHS   _  4-6 MONTHS   _  > 6 MONTHS                  *10
11*                                                                                *11
12* WHO IDENTIFIED BARRIER?: _____         *12
13* ARE SPECIAL ACCOMMODATIONS NEEDED BASED ON BARRIERS?  _ (Y/N)                  *13
14* SPECIFY THE ACCOMMODATIONS THAT THE AGENCY WILL ARRANGE: _____  *14
15* _____  *15
16* _____  *16
17* _____  *17
18* IF APPROPRIATE, HAS PARTICIPANT BEEN REFERRED FOR FORMAL                       *18
19*        ASSESSMENT FOR THIS BARRIER?: _ (Y/N)     REFERRAL DATE  : __ __ ____   *19
20* ASSESSMENT COMPLETED: _ (Y/N)                    COMPLETION DATE: __ __ ____   *20
21* ASSESSMENT COMPLETED BY: _____      *21
22* PF13 WPED  PF14 WPAW  PF15 WPJR  PF5 ADD MORE BARRIERS                         *22
23* NEXT TRAN: ____       PARMS: _____ MORE...*23
24*                                                                                *24
   ****************************************************************************
```

This screen was created to provide more detail and easier access to information about conditions that may be affecting participation. A new detail screen must be entered for each additional barrier.

Entering a barrier on this screen does not imply that there must be a formal assessment completed for it.

Use PF5 to add additional barriers. Press Enter to return to the driver flow.

Parms

PIN: Accessing this screen using only the participant's PIN will display all currently open barriers in query mode

PIN/Barrier (code): Using these parms will display all sequences of the particular barrier specified. If the barrier is currently open, that screen will be displayed in update mode. All closed sequences and history screens for the open sequence will be displayed in query mode. All updates/changes to currently open barriers must be done using these parms. The barrier code comes from table TWBA.

PIN//A (add): Using these parms will pull up a blank screen for entry of a new barrier. If a worker tries to create a new screen for a currently open barrier, s/he will receive an edit message.

Lines/Fields

Lines 1-5: These lines provide the same information as on all the other assessment screens.

Line 6: DC is the delete code field. Barriers is for the code identifying which barrier is being detailed. This field is mandatory. The barrier code comes from table TWBA. Individual Affected indicates who has the barrier, either the client or a family member. This field is mandatory.

Line 7: Barrier Begin Date identifies when the barrier began. This is a mandatory field. If the barrier has ended, Barrier End Date is the date it ended.

Line 8: Could Barrier Affect Hours Of Participation is a mandatory field. It may be based on the medical capacity form for W-2 or FSET or discussions between the case manager and the client.

Line 9-10: One of the How Soon Can Barrier Be Overcome indicators (< 1 Month, 1-3 Months, 4-6 Months, > 6 months) must be marked. This may be based on the medical capacity form for W-2 or FSET or discussions between the case manager and the client.

Line 12: Who Identified Barrier is free format text.

Line 13-17: Specify The Accommodations That The Agency Will Arrange is mandatory. Comments should be entered on the Explain Accommodations Needed lines.

Line 18-19: If Appropriate, Has Participant Been Referred for Formal Assessment For This Barrier is a mandatory field. Referral Date should be the date the written referral was given to the participant. This is a mandatory field if it is indicated that a referral was done. **Note**: Not all barriers require a formal assessment.

Line 20: Assessment Completed indicates if the formal assessment was completed. Completion Date is for the date the formal assessment was completed. It is mandatory if Assessment Completed is Y.

Line 21: Assessment Completed By should list which provider did the formal assessment.

Line 22: PF5 Add More Barriers functionality saves the current screen and refreshes to a blank screen to add a new barrier.

Tables

Barriers: TWBA (assessment barriers)

WPRU – Assessment - Unsubsidized Employment

```
   ************************************************************************************
01* WPRU              ASSESSMENT – UNSUBSIDIZED EMPLOYMENT     10/18/01 09:34    *01
02*                                                         XID123 A WORKER     *02
03* PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123       *03
04* NAME: EXAMPLE          CASE            A                                     *04
05* LAST ASSESSMENT UPDATE: __ __ ____               UPDATED DATE: __ __ ____    *05
06*                                                                             *06
07*                                                                             *07
08*                                                                             *08
09*                                                                             *09
10* IS PARTICIPANT READY FOR UNSUBSIDIZED EMPLOYMENT (Y/N)?: _                  *10
11* SUMMARY OF DECISION: _____*11
12* _____*12
13* _____*13
14* _____*14
15*                                                                             *15
16*                                                                             *16
17*                                                                             *17
18*                                                                             *18
19*                                                                             *19
20*                                                                             *20
21*                                                                             *21
22* PF13 WPED  PF14 WPAW  PF15 WPJR                                             *22
23* NEXT TRAN: ____      PARMS: _____ MORE...*23
24*                                                                             *24
   ************************************************************************************
```

This screen has been designed to explain the results of the informal assessment done by the case manager.

Lines/Fields

Lines 1-5: These lines provide the same information as on all the other assessment screens.

Line 10: Is Participant Ready For Unsubsidized Employment should be answered based on the results of the informal assessment. It is a mandatory field.

Line 11: Summary Of Decision should be a complete summary of why line 10 was answered Y or N. Comments can be continued on CMCC if there is not enough room. "See case comments" may be used only if there is not enough room to complete all comments on this screen.

WPJS – Employability Service Plan - 1

```
    ****************************************************************************
01* WPJS                  EMPLOYABILITY SERVICE PLAN - 1        10/18/01 09:34    *01
02*                                                        XID123 A WORKER    *02
03* PIN: 0123456789                              OFFICE: 9876                 *03
04* NAME: EXAMPLE        CASE            A        COUNTY/TRIBAL UNIT: 01       *04
05*  *** LAST EMPLOYABILITY PLAN UPDATE: __ __ ____   CASE MANAGER: _____    *05
06* PROGRAM EMPLOYMENT GOALS:                                                 *06
07*     PRIMARY:   DOT ___ ___ ___   TITLE: _____     *07
08*     SECONDARY: DOT ___ ___ ___   TITLE: _____     *08
09*                                                                           *09
10* RELATED GOALS:   LONG TERM  _____   *10
11*                  SHORT TERM _____     *11
12*                                                                           *12
13* PARTICIPANT`S PERSONAL GOAL:                                              *13
14*                          STEPS                    DATE COMPLETED          *14
15* 1 _____  __ __ ____            *15
16* 2 _____  __ __ ____            *16
17* 3 _____  __ __ ____            *17
18* 4 _____  __ __ ____            *18
19* 5 _____  __ __ ____            *19
20* 6 _____  __ __ ____            *20
21*                                                                           *21
22* PF13 WPED  PF14 WPAW  PF15 WPJR                                           *22
23* NEXT TRAN: ____      PARMS: _____ *23
24*                                                                           *24
    ****************************************************************************
```

Deleted Lines/Fields

Line 9: Alternate Employment Goal DOT and Title

Added Lines/Fields

None

Modified Lines/Fields

None

Tables

Program Employment Goal: TDOT (WP dictionary of occupational titles)

WPWC – Update WP Client Information - 2

```
    ******************************************************************************
01* WPWC                  UPDATE WP CLIENT INFORMATION - 2      10/18/01 09:34   *01
02*                                                             XID123 A WORKER  *02
03*                                                                              *03
04* PIN: 0123456789  SSN: 111 22 3333  WDA: 01   CTY/TRIBE: 01    OFFICE: 9876   *04
05*                                                                              *05
06* NAME: _____ _ _____ _____                           *06
07* ADDRESS: _____  ___ __ _____ ____ __ _____             *07
08*          _____                                       *08
09* CITY:   _____ STATE: __  ZIP: _____                          *09
10*                                                                             *10
11* RACE/ETHNIC: _   SEX: _              LANGUAGE CODE: _      LANGUAGE SPOKEN: _ *11
12* REFUGEE: _   ENTRY DATE: __ __ ____   TRIBAL MEMBER: __     DISABILITY: _    *12
13* VETERAN: _                         MILITARY DATES: __ __ ____ TO __ __ ____  *13
14* CASE MANAGER: _____              ES WORKER: _____       AUDIT: _        *14
15* CASE: 1234567890                   CAT: ____ SEQ: __                        *15
16*                                                                             *16
17*                                                                             *17
18*                                                                             *18
19*                                                                             *19
20*                                                                             *20
21*                                                                             *21
22* PF13 WPED  PF14 WPJR  PF15 WPWT  PF16 WPWA  PF17 WPAW                       *22
23* NEXT TRAN: ____      PARMS: _____ *23
24*                                                                             *24
    ******************************************************************************
```

Deleted Lines/Fields

Line 14: Currently Employed

Line 15: Vehicle Available, Drivers License, and Type (of license)

Line 16: Currently In School and Original Education Level

Line 17: Last Year Attended (school)

Added Lines/Fields

None

Modified Lines/Fields

None

Tables

Language Spoken: TLAG (language code table)
Tribal Member: TWTM (WP individual tribal member name)

CRWT – WTW Eligibility Determination

```
     ***************************************************************************
01*  CRWT                 WTW ELIGIBILITY DETERMINATION         10/18/01 09:34    *01
02*                                                          XID123 A WORKER      *02
03*  RFA NUMBER: 9876543210                                                       *03
04*  PIN: 0123456789                                      SSN: 111 22 3333        *04
05*  NAME: CASE         A EXAMPLE                         WDA: __ _____   *05
06*  PARTICIPATION BEG DT: __ __ ____                                             *06
07*  70% CRITERIA:                    ---------------TANF---------------          *07
08*     _  CUSTODIAL:                 RECIP      COMPLETING    EXHAUSTED          *08
09*         CASE#: _____          30 MO     WITHIN 12 MO   60 MO            *09
10*                                      _           _            _               *10
11*                                                                               *11
12*     _  NON-CUSTODIAL:             EMP.       AST. GROUP    PERSONAL  CONTRACT  *12
13*         CASE#: _____         STATUS     CONNECTION    CONTRACT    DATE   *13
14*                                     __           __           _     __ __ ____ *14
15*                                                                               *15
16* 30% CRITERIA:              CUST PARENT    FOSTER CARE   TANF RECIP BARRIERS   *16
17*                            BELOW 100% POV.    YOUTH                           *17
18*                                _              _           __      __      __  *18
19*                                                                               *19
20*    WTW EDF SIGNATURE DT: __ __ ____         WTW PGM TYPE: __                  *20
21*    WTW TARGET POPULATION DETERMINATION: __ (70% OR 30% OR NOT ELIGIBLE)      *21
22* PF24: UPDATE ELIGIBILITY DETERMINATION                                        *22
23* NEXT TRAN: ____      PARM: _____         *23
24*                                                                               *24
     ***************************************************************************
```

Deleted Lines/Fields

Line 19: Additional Barriers. This information is now gathered on WPBD.

Added Lines/Fields

None

Modified Lines/Fields

None

WPWT – Update WP-WT Client Information

```
    *******************************************************************************
01* WPWT                 UPDATE WP-WT CLIENT INFORMATION        10/18/01 09:34    *01
02*                                                           XID123 A WORKER     *02
03*                                                                               *03
04* PIN: 0123456789  SSN: 111 22 3333     WDA: 01   CTY/TRIBE: 01  OFFICE: 9876   *04
05* NAME: CASE            A EXAMPLE                                               *05
06*                                                                               *06
07* CURRENT PART BEGIN  DT: __ __ ____   TARGET POP: __ % TYPE INDIV: _____  *07
08* ORIGINAL PART BEGIN DT: __ __ ____   TARGET POP: __ % TYPE INDIV: _____  *08
09*                         -----------------TANF------------------               *09
10*  70% CUSTODIAL:        RECIP            COMPLETING    EXHAUSTED               *10
11*      CASE#: _____ 30 MO            WITHIN 12 MO    60 MO                 *11
12*                         _                 _              _                    *12
13*  30% CUSTODIAL:        CUST PARENT      FOSTER CARE   TANF RECIP             *13
14*                        BELOW 100% POV.    YOUTH        BARRIERS              *14
15*                          _                 _           __  __  __            *15
16*  70% NON-CUSTODIAL:     EMP.             AST. GROUP    PERSONAL   CONTRACT    *16
17*      CASE#: _____  STATUS           CONNECTION    CONTRACT      DATE     *17
18*                          __                __             _       __ __ ____  *18
19*                                                                               *19
20*  STAND-ALONE TRAINING: _  EFF BEG DT: __ __ ____    EFF END DT: __ __ ____   *20
21*  WTW EDF SIGNATURE DT: __ __ ____               WTW PGM TYPE: __             *21
22* PF13 WPED  PF14 WPJR  PF15 WPWC  PF22 WPWI                                   *22
23* NEXT TRAN: ____      PARMS: _____  *23
24*                                                                               *24
    *******************************************************************************
```

Deleted Lines/Fields

Line 19: Additional Barriers. This information is now gathered on WPBD.

Added Lines/Fields

None

Modified Lines/Fields

None

WPWA – Update WP-WA Client Information

```
     ******************************************************************************
01*  WPWA              UPDATE WP-WA CLIENT INFORMATION          10/18/01 09:34    *01
02*                                                         XID123 A WORKER       *02
03*  PIN: 0123456789  SSN: 111 22 3333    WDA: 01   CTY/TRIBE: 01  OFFICE: 9876   *03
04*  NAME: CASE          A EXAMPLE                                                *04
05*  CURRENT DETERMINATION    _ CUSTODIAL PARENT   _ NON CUSTODIAL PARENT         *05
06*  PARTICIPATION BEG DT: __ __ ____      WAA PGM REVIEW DUE DT: __ __ ____      *06
07*                                        REVIEW COMPLETION DT : __ __ ____      *07
08   CUSTODIAL PARENT:                                                           *08
09*   FAMILY SIZE:  __  # ADULTS    __  # CHILDREN                               *09
10*                                                                              *10
11*  NON CUSTODIAL PARENT:              PATERNITY VERIF: _                       *11
12*   TOTAL INCOME AMT(MTHLY): ____ __    CHILD SUPPORT PAID AMT(MTHLY): ____ __ *12
13* #        CHILDREN NAME                       SSN        DOB     PTRNTY? CTY*13
14* 1 _____ _ _____ ___ ___ __ ____ __ __ ____   _   __ *14
15* 2 _____ _ _____ ___ ___ __ ____ __ __ ____   _   __ *15
16* 3 _____ _ _____ ___ ___ __ ____ __ __ ____   _   __ *16
17*                                                                              *17
18*   PROGRAM TRACK: _                   WAA SERVICE CATEGORY: __                *18
19*   INCOME VERIF AT REVIEW: _            INCOME ELIGIBILITY AMT(MTHLY) : ____.__*19
20*   EMPLOYED AT EXIT: _              ENTRY EARNED INCOME AMT(MTHLY): ____.__    *20
21*   EXIT EARNED INCOME AMT(MTHLY): ____.__ WAA APP SIGNATURE DT: __ __ ____    *21
22*  PF13 WPED  PF14 WPJR  PF15 WPWC  PF22 WPWI                                  *22
23*  NEXT TRAN: ____     PARMS: _____       *23
24*                                                                              *24
     ******************************************************************************
```

Deleted Lines/Fields

Line 18: Additional Barriers. This information is gathered on WPBD.

Added Lines/Fields

None

Modified Lines/Fields

None

Appendix

Assessment Driver Flow

```
        ┌──────────────┐
        │     WPED     │
        └──────┬───────┘
               │                        ┌──────────────┐
               ▼                        │     WPEL     │
        ┌──────────────┐                └──────┬───────┘
        │     WPAW     │─────────┐             │
        └──────┬───────┘         └───────▶┌──────────────┐
               │                          │     WPEH     │
               │                          └──────────────┘
               ▼
        ┌──────────────┐                  ┌──────────────┐
        │     WPJR     │─────────────────▶│     WPBD     │
        └──────┬───────┘                  └──────────────┘
               │
               ▼
        ┌──────────────┐
        │     WPRU     │
        └──────┬───────┘
               │
               ▼
        ┌──────────────┐
        │     WPJS     │
        └──────┬───────┘
               │
               ▼
        ┌──────────────┐
        │     WPAS     │
        └──────┬───────┘
               │
               ▼
        ┌──────────────┐
        │     WPCH     │
        └──────┬───────┘
               │
               ▼
        ┌──────────────┐
        │     WPCS     │
        └──────────────┘
```
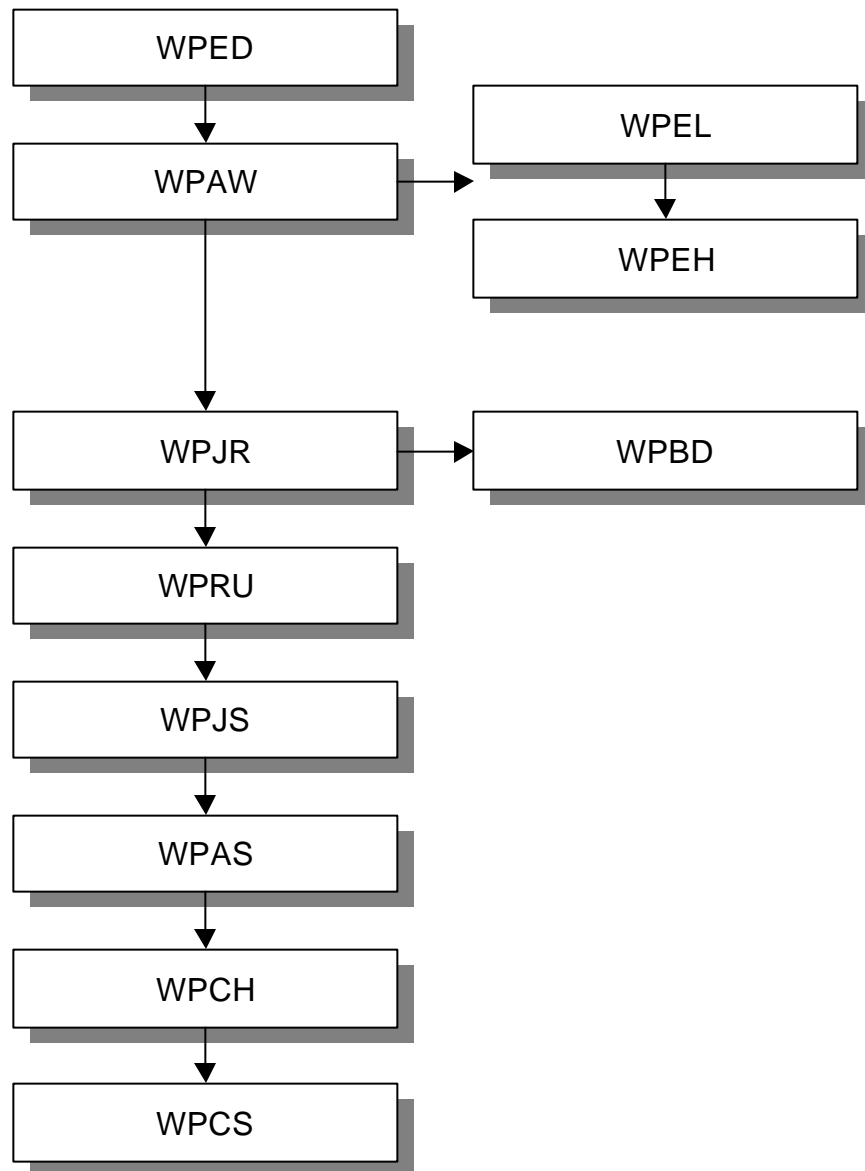
The component screen (WPCS) is the end of the assessment driver flow. If a worker leaves the assessment driver flow at any point before then, the next time s/he tries to tran to a specific screen within the driver flow, CARES will automatically return to the last screen completed during the assessment.

New Tables

TWBA – Assessment Barriers

AO   AODA issues
CC   Child care issues
CP   Child protection services involvement
DC   Dependent child with behavioral issues
DI   Disabled W-2 group member
DM   Disabled group member non W-2
DV   Domestic violence victim
FE   Felon
HO   Unstable housing/homeless
HS   No HS diploma or equivalent
JO   Dependent juvenile offender
LE   Limited English proficiency
LD   Learning disability
MA   Math assessment below 5.0 grade level
MF   Migrant/seasonal worker
MH   Mental health limitations
OT   Other
PB   Currently on probation/parole
PL   Physical limitations
RA   Reading assessment below 5.0 grade level
TR   Lack of transportation

TWOA – Other Agency/Program Involvement

AO   AODA provider
BT   Birth to three
CA   Community action program
CP   Child protection services
DM   Domestic violence provider
DV   DVR
HS   Head Start
JC   Job center
JS   Job Service
LS   Legal services
MH   Mental health provider
OT   Other
PH   Physical health provider
SA   Social services agency
SD   School district special services
SS   Social Security Administration
WC   Workers compensation
UI   Unemployment insurance

WPTS Example

Participant was enrolled on 3/5/01. Test scores were entered.

```
WPED                         ASSESSMENT - EDUCATION              03/05/01 13:45
                                                                 XID123 A WORKER
 PIN: 0123456789  OFFICE: 9876   CTY/TRIBE: 01      CASE MANAGER: XID123
 NAME: EXAMPLE          CASE               A
 LAST ASSESSMENT UPDATE: 03 05 2001              UPDATED DATE: 03 05 2001


 DO YOU WANT TO INITIATE A NEW ASSESSMENT: N  (Y/N)


 EDUCATION HISTORY:   ORIGINAL   CURRENT
  HIGHEST ED. LEVEL:    011        011        CURRENTLY IN SCHOOL: N
  LAST YEAR ATTENDED:  1998       1998
      WHERE ATTENDED       DEGREE      MM/YR RECEIVED      COURSE OF STUDY

   _____      __        __ ____       _____
   _____      __        __ ____       _____
 TESTING:       --------ORIGINAL--------    --------CURRENT---------
                LEVEL    TEST    MM/YEAR    LEVEL    TEST    MM/YEAR
  READING       09.9     TABE    03 2001    09.9     TABE    03 2001
  MATH          ____     ____    __ ____    ____     ____    __ ____
  ENGLISH       ____     ____    __ ____    ____     ____    __ ____
  APTITUDE               ____    __ ____             ____    __ ____
  INTEREST               ____    __ ____             ____    __ ____
 PF14 WPAW  PF15 WPJR   PF16 WPJS  PF17 WPTS
 NEXT TRAN: ____     PARMS: 9516105068_____
```

WPTS displays the first set of test scores.

```
WPTS                     ASSESSMENT-TESTING SUMMARY         03/05/01 09:34
                                                            XID123 A WORKER
 PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123
 NAME: EXAMPLE        CASE             A

            LEVEL      TEST      MM/YEAR
 READING    09.9       TABE      03 2001
 MATH
 ENGLISH
 APTITUDE
 INTEREST













 PF13 WPED  PF14 WPAW   PF15 WPJR
 NEXT TRAN: ____     PARMS: _____
```

New scores were entered on 5/15/01.

```
 WPED                    ASSESSMENT – EDUCATION              10/19/01 13:45
                                                             XID123 A WORKER
  PIN: 0123456789   OFFICE: 9876   CTY/TRIBE: 01     CASE MANAGER: XID123
  NAME: EXAMPLE       CASE            A
  LAST ASSESSMENT UPDATE: 03 05 2001            UPDATED DATE: 05 15 2001


  DO YOU WANT TO INITIATE A NEW ASSESSMENT: N  (Y/N)


 EDUCATION HISTORY:   ORIGINAL   CURRENT
   HIGHEST ED. LEVEL:    011       011        CURRENTLY IN SCHOOL: N
   LAST YEAR ATTENDED:   1998      1998
      WHERE ATTENDED       DEGREE     MM/YR RECEIVED     COURSE OF STUDY
    _____    __       __ ____      _____
    _____    __       __ ____      _____
  TESTING:       --------ORIGINAL--------   -------CURRENT---------
                 LEVEL    TEST   MM/YEAR     LEVEL    TEST   MM/YEAR
   READING       09.9     TABE   03 2001     09.9     TABE   03 2001
   MATH          09.0     TABE   05 2001     09.0     TABE   05 2001
   ENGLISH       09.1     ABL1   05 2001     09.1     ABL1   05 2001
   APTITUDE      _____    __ ____            _____    __ ____
   INTEREST      _____    __ ____            _____    __ ____
  PF14 WPAW  PF15 WPJR   PF16 WPJS  PF17 WPTS
  NEXT TRAN: ____     PARMS: 9516105068_____
```

WPTS now displays 2 sets of scores: the current set from 5/15 and the original set from 3/5.

```
  WPTS                  ASSESSMENT-TESTING SUMMARY         10/18/01 09:34
                                                           XID123 A WORKER
  PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123
  NAME: EXAMPLE         CASE          A

            LEVEL       TEST      MM/YEAR
  READING   09.9        TABE      03 2001
  MATH      09.0        TABE      05 2001
  ENGLISH   09.1        ABL1      05 2001
  APTITUDE
  INTEREST


  READING   09.9        TABE      03 2001
  MATH
  ENGLISH
  APTITUDE
  INTEREST




  PF13 WPED  PF14 WPAW   PF15 WPJR
  NEXT TRAN: _____     PARMS: _____
```

Another set of reading and math tests was done in September and entered 10/01/01.

```
WPED                      ASSESSMENT - EDUCATION              10/19/01 13:45
                                                             XID123 A WORKER
 PIN: 0123456789   OFFICE: 9876   CTY/TRIBE: 01      CASE MANAGER: XID123
 NAME: EXAMPLE       CASE             A
 LAST ASSESSMENT UPDATE: 09 01 2001           UPDATED DATE: 10 01 2001


 DO YOU WANT TO INITIATE A NEW ASSESSMENT: N  (Y/N)


EDUCATION HISTORY:   ORIGINAL   CURRENT
  HIGHEST ED. LEVEL:    011       011      CURRENTLY IN SCHOOL: N
  LAST YEAR ATTENDED:  1998      1998
     WHERE ATTENDED       DEGREE    MM/YR RECEIVED    COURSE OF STUDY
  _____    __        __ ____      _____
  _____    __        __ ____      _____
 TESTING:      --------ORIGINAL--------    -------CURRENT---------
              LEVEL    TEST    MM/YEAR     LEVEL    TEST    MM/YEAR
  READING     09.9     TABE    03 2001     10.2     TABE    09 2001
  MATH        09.0     TABE    05 2001     09.5     TABE    09 2001
  ENGLISH     09.1     ABL1    05 2001     09.1     ABL1    05 2001
  APTITUDE             _____   __ ____              _____   __ ____
  INTEREST             _____   __ ____              _____   __ ____
 PF14 WPAW  PF15 WPJR   PF16 WPJS  PF17 WPTS
 NEXT TRAN: ____     PARMS: 9516105068_____
```

WPTS now has 2 pages and displays the scores from 10/1, 5/15, and 3/5.

```
 WPTS                   ASSESSMENT-TESTING SUMMARY       10/18/01 09:34
                                                        XID123 A WORKER
 PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123
 NAME: EXAMPLE        CASE            A

           LEVEL      TEST      MM/YEAR
 READING   10.2       TABE      09 2001
 MATH      09.5       TABE      09 2001
 ENGLISH   09.1       ABL1      05 2001
 APTITUDE
 INTEREST


 READING   09.9       TABE      03 2001
 MATH      09.0       TABE      05 2001
 ENGLISH   09.1       ABL1      05 2001
 APTITUDE
 INTEREST



 PF13 WPED  PF14 WPAW   PF15 WPJR
 NEXT TRAN: ____     PARMS: _____ MORE...
```

```
 WPTS                   ASSESSMENT-TESTING SUMMARY        10/18/01 09:34
                                                          XID123 A WORKER
 PIN: 0123456789    OFFICE: 9876   CTY/TRIBE: 01   CASE MANAGER: XID123
 NAME: EXAMPLE        CASE          A


            LEVEL     TEST      MM/YEAR
 READING    09.9      TABE      03 2001
 MATH
 ENGLISH
 APTITUDE
 INTEREST






 PF13 WPED  PF14 WPAW   PF15 WPJR
 NEXT TRAN: ____      PARMS: _____
```